

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

National Pro-Life Alliance PAC

ADDRESS (number and street)

4521 Windsor Arms CT

☐Check if different  
than previously  
reported. (ACC)

Annandale

VA

22003

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00358051

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☒July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

04

01

2006

through

06

30

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Mr. Steve Antosh

Signature of Treasurer

Electronically Filed by Mr. Steve Antosh

Date

07

17

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only							
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**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
National Pro-Life Alliance PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	4	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2006</span>		164441.82
(b) Cash on Hand at Beginning of Reporting Period .....	152441.82	
(c) Total Receipts (from Line 19) .....	58913.34	58913.34
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	211355.16	223355.16
7. Total Disbursements (from Line 31) .....	1095.28	13095.28
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	210259.88	210259.88
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

National Pro-Life Alliance PAC

Report Covering the Period:

From:

M M  
0 4D D  
0 1Y Y Y Y  
2 0 0 6

To:

M M  
0 6D D  
3 0Y Y Y Y  
2 0 0 6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	11800.00	11800.00
(i) Itemized (use Schedule A) .....	47113.34	47113.34
(ii) Unitemized .....	58913.34	58913.34
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➡	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➡	58913.34	58913.34
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	58913.34	58913.34
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	58913.34	58913.34

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		0.00	0.00
(i) Federal Share.....			
(ii) Non-Federal Share.....		0.00	0.00
(b) Other Federal Operating Expenditures.....		0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....		0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....		0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		1000.00	13000.00
24. Independent Expenditure (use Schedule E) .....		0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....		0.00	0.00
26. Loan Repayments Made.....		0.00	0.00
27. Loans Made.....		0.00	0.00
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....		0.00	0.00
(b) Political Party Committees		0.00	0.00
(c) Other Political Committees (such as PACs) .....		0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....		0.00	0.00
29. Other Disbursements.....		95.28	95.28
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....		0.00	0.00
(ii) "Levin" Share .....		0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....		0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....		0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..		1095.28	13095.28
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....		1095.28	13095.28

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	58913.34	58913.34
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	58913.34	58913.34
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 / 17

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Pro-Life Alliance PAC

**A.** Full Name (Last, First, Middle Initial)

Mrs. Jacques Bergeron

Mailing Address 18 Duff Street

City State Zip Code  
Watertown MA 02472-3016

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Disabled

Occupation  
Not Employed

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt

05 / 18 / 2006

Transaction ID: SA11A1.8196

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)

Mr. Michael Britt

Mailing Address 2447 Kingsley Drive

City State Zip Code  
Grand Prairie TX 75050-8326

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Field service Eng.

Occupation  
Lam Research Corp.

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt

06 / 05 / 2006

Transaction ID: SA11A1.6599

Amount of Each Receipt this Period

250.00

**C.** Full Name (Last, First, Middle Initial)

Rosemary A. Corrigan

Mailing Address 636 W Briar Place

City State Zip Code  
Chicago IL 60657-4521

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt

05 / 05 / 2006

Transaction ID: SA11A1.8741

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Pro-Life Alliance PAC

A. Full Name (Last, First, Middle Initial)

Mr. Donald E. Cummings

Mailing Address 837 Tioga Avenue

City

Bethlehem

State

PA

Zip Code

18018-3319

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mgmt ConsultantOccupation  
DEC Inc.

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 7 / 2 0 0 6

Transaction ID: SA11A1.7758

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)

Mr. James Drake

Mailing Address 7579 W Sexton Road

City

Elkhart Lake

State

WI

Zip Code

53020

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dairy ProducesOccupation  
Self

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: SA11A1.6319

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)

Mr. Dick Finn

Mailing Address 10106 NW 74th Street

City

Kansas City

State

MO

Zip Code

64152-1708

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
N/A

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.7823

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional) .....

1000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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PAGE 8 / 17

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NAME OF COMMITTEE (In Full)

National Pro-Life Alliance PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. & Mrs. Alfred Hammersmith		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6
Mailing Address PO Box 277		<b>Transaction ID:</b> SA11A1.8170
City Ellinwood	State KS	Zip Code 67526-0277
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Requested	Occupation Requested	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Frank Jagodzinski		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 4461 283rd Street		<b>Transaction ID:</b> SA11A1.9687
City Toledo	State OH	Zip Code 43611-1865
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Requested	Occupation Requested	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Dr. Howard Johnson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 318 Centre Street		<b>Transaction ID:</b> SA11A1.7785
City Hereford	State TX	Zip Code 79045-2722
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer M.D.	Occupation Self	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Pro-Life Alliance PAC

Full Name (Last, First, Middle Initial)

**A.** Mr. Steven E. Krook

Mailing Address 826 West Oyster Lane

City State Zip Code  
 Lantana FL 33462

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Requested

Occupation  
Requested

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 6

Transaction ID: SA11A1.9997

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Cecilia Lageman

Mailing Address 5515 Forest Glen Drive

City State Zip Code  
 Grove City OH 43123-9258

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Printer

Occupation  
Ross Laboratories

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 0 / 2 0 0 6

Transaction ID: SA11A1.7214

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C.** Lt.col. John L. Maher

Mailing Address 1700 the Greens Way Apt. 243

City State Zip Code  
 Jax Bch FL 32250-2497

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Requested

Occupation  
Requested

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 6

Transaction ID: SA11A1.8597

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

2550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 10 / 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Pro-Life Alliance PAC

**A.** Full Name (Last, First, Middle Initial)  
Mr. Maurice Melvin

Mailing Address 301 Hartnell Ave. # 224

City State Zip Code  
 Redding CA 96002-1806

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 7 / 2 0 0 6

Transaction ID: SA11A1.8447

Amount of Each Receipt this Period

500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Ray P. Oden, Jr.

Mailing Address 702 Thora Boulevard

City State Zip Code  
 Shreveport LA 71106-1824

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.7011

Amount of Each Receipt this Period

500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Christian B. Peper

Mailing Address 720 Olive Street

City State Zip Code  
 Saint Louis MO 63101-2338

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Requested

Occupation  
Requested

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 8 / 2 0 0 6

Transaction ID: SA11A1.6542

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

2000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 11 / 17

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

National Pro-Life Alliance PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. John Ploth Mailing Address 722 Walnut Street City State Zip Code Kansas City MO 64106-1654 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Requested Occupation Requested Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.9053 Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. & Mrs. S. Jason Sammons Mailing Address 42 Sunnymead Drive City State Zip Code Jackson TN 38305-1862 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Oral and Maxillofacial Surgeon Occupation Oral Surgery Associates of West Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.9951 Amount of Each Receipt this Period 500.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Clara Schramm Mailing Address 144 Feller Drive City State Zip Code Central Islip NY 11722-1212 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation divoned-Mx Cx -Worked Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.7419 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) .....

1000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Pro-Life Alliance PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Devon Smith		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6
Mailing Address 1301 N Ruth Road		
City	State	Zip Code
Deckerville	MI	48427-9737
FEC ID number of contributing federal political committee.		<b>Transaction ID:</b> SA11A1.9867
Name of Employer factory worker		Amount of Each Receipt this Period 500.00
Occupation Dom mfg		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Marge Spezzano		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 855 S Atlantic Avenue		
City	State	Zip Code
Cocoa Beach	FL	32931-2424
FEC ID number of contributing federal political committee.		<b>Transaction ID:</b> SA11A1.8721
Name of Employer Requested		Amount of Each Receipt this Period 250.00
Occupation Requested		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Richard Szarko		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address 2512 Shenck Road		
City	State	Zip Code
Manheim	PA	17545-9118
FEC ID number of contributing federal political committee.		<b>Transaction ID:</b> SA11A1.8805
Name of Employer Requested		Amount of Each Receipt this Period 250.00
Occupation Requested		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

**SUBTOTAL** of Receipts This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 17

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Pro-Life Alliance PAC

**A.** Full Name (Last, First, Middle Initial)  
Mr. Paul J. Thorn

Mailing Address 6443 N Rockwell St.

City State Zip Code  
Chicago IL 60645-5319

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Receipt For: 2006

☐ Primary ☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	0	6

Transaction ID: SA11A1.9675

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Kristen Watkins

Mailing Address 3010 Autumn Drive

City State Zip Code  
Palm Harbor FL 34683-2133

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mortgage LendersOccupation  
Providence Mortgage

Receipt For: 2006

☐ Primary ☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	0	6

Transaction ID: SA11A1.9989

Amount of Each Receipt this Period

500.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Delores Wavra

Mailing Address 3914 Duprie Road

City State Zip Code  
Standish MI 48658-9403

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired-On Disability

Occupation

Receipt For: 2006

☐ Primary ☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	1		2	0	0	6

Transaction ID: SA11A1.9881

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional) .....

1250.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Pro-Life Alliance PAC

**A.**

Full Name (Last, First, Middle Initial)

Mr. Leo G. Willey

Mailing Address 26520 Oak Crossing Road

City

Newhall

State

CA

Zip Code

91321-2252

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.6463

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

500.00

**TOTAL** This Period (last page this line number only) .....

11800.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 15 / 17

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Pro-Life Alliance PAC

Full Name (Last, First, Middle Initial)

**A.** SALI FOR CONGRESS

Mailing Address PO Box 71

City  
KUNA

State  
ID

Zip Code  
83634

Purpose of Disbursement

Candidate Name  
SALI FOR CONGRESS

Office Sought: ☒ House  
☐ Senate  
☐ President

State: ID District: 01

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.10008

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	4		2	0	0	6

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

1000.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 16 / 17

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
National Pro-Life Alliance PAC

Full Name (Last, First, Middle Initial)

## **A. BB&T Bank**

Mailing Address 4401 Backlick Road

City Annandale State VA Zip Code 22003

Purpose of Disbursement

Bank Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB29.10009

Date of Disbursement

/   /

Amount of Each Disbursement this Period

20.00

## **B. BB&T Bank**

Mailing Address 4401 Backlick Road

City Annandale State VA Zip Code 22003

Purpose of Disbursement

Bank Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB29.10010

Date of Disbursement

/   /

Amount of Each Disbursement this Period

10.00

## **C. BB&T Bank**

Full Name (Last, First, Middle Initial)

Mailing Address 4401 Backlick Road

City Annandale State VA Zip Code 22003

Purpose of Disbursement

Bank Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB29.10011

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

**SUBTOTAL** of Disbursements This Page (optional) .....

80.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 17 / 17

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Pro-Life Alliance PAC

Full Name (Last, First, Middle Initial)

**A.** BB&T Bank

Mailing Address 4401 Backlick Road

City  
Annandale

State  
VA

Zip Code  
22003

Purpose of Disbursement  
Service Charge

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.10012

Date of Disbursement

/   /

Amount of Each Disbursement this Period

15.28

**SUBTOTAL** of Disbursements This Page (optional) .....

15.28

**TOTAL** This Period (last page this line number only) .....

95.28